

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 7/8/05 2 Serial/Patent # 10/525,595

3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$100.00	
		8 TO BE REFUNDED BY:		
10 REASON:		Treasury Check		
Overpayment		Credit Deposit A/C #:		
Duplicate Payment		, <u>50-2663</u>		
No Fee Due (Explanation):		<i>Fee Code Corrections</i>		

11 REFUND REQUESTED BY:	TITLE: _____
TYPED/PRINTED NAME: <u>BARBARA CAMPBELL</u>	PHONE: <u>703 308-9140</u>
SIGNATURE: <u>BC</u>	EXT 217
OFFICE: <u>PCT/DO/EO</u>	*****
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****	
APPROVED: _____	Repln. Ref: 07/11/2005 BCAMPBEL 0015004600 DAH:502663 Name/Number:10525595 FC: 9204 \$100.00 CR

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B